



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2133		2. Name of Corporation BEACON ONE, INC.			
3. Street Address Principal Business Office 148 HARGRAVES DRIVE			City PORTSMOUTH	State RI	Zip 02871-
4. Business Phone No. 4016833494		5. State of Incorporation RHODE ISLAND			6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL REAL ESTATE					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name David B. Hayes			Vice President Name Vacant		
Street Address 148 Hargraves Drive			Street Address		
City Portsmouth	State RI	Zip 02871	City	State	Zip
Secretary Name David B. Hayes/AsstSec: Robert M. Silva			Treasurer Name David B. Hayes		
Street Address 148 Hargraves Drive/1100 Aquidneck Avenue			Street Address 148 Hargraves Drive		
City Portsmouth/Middletown	State RI	Zip 02871/02842	City Portsmouth	State RI	Zip 02871
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			100	Common/None	No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



2 1 3 3

*2133 DBC
FILED
File Date 3-1-2005 1148
Check No.
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: [Signature]
Date: 2/25/05
Robert M. Silva
Print or Type Name of Officer
Assistant Secretary
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2133	2. Name of Corporation BEACON ONE, INC.	City PORTSMOUTH	State RI	Zip 02871-
3. Street Address Principal Business Office 148 HARGRAVES DRIVE	5. State of Incorporation RHODE ISLAND	6. SIC Code 5538		
4. Business Phone No. 4016833494	7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL REAL ESTATE			

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name David B. Hayes	Vice President Name Vacant
Street Address 148 Hargraves Drive	Street Address
City Portsmouth	City
State RI	State
Zip 02871	Zip
Secretary Name David B. Hayes/AsstSec: Robert M. Silva	Treasurer Name David B. Hayes
Street Address 148 Hargraves Dr/1100 Aquidneck Ave	Street Address 148 Hargraves Drive
City Portsmouth/Middletown	City Portsmouth
State RI	State RI
Zip 02871/02842	Zip 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name NONE	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE		

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common/None	No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



2 1 3 3

2133 DBC 02/12/04 10:46AM

FILED

File Date
FEB 23 2004

Check No.

By 350 GMA

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Robert M. Silva

Print or Type Name of Officer

Assistant Secretary

Title of Officer

Date

2/13/04



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *2133*		2. Name of Corporation BEACON ONE, INC.			
3. Street Address Principal Business Office 148 HARGRAVES DR		City PORTSMOUTH	State RI	Zip 02871-	
4. Business Phone No. 4016833494	5. State of Incorporation RHODE ISLAND		6. SIC Code 5538		
7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL REAL ESTATE					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
President Name David B. Hayes		Vice President Name Vacant			
Street Address 148 Hargraves Drive		Street Address			
City Portsmouth	State RI	Zip 02871	City	State	Zip
Secretary Name David B. Hayes/AsstSec: Robert M. Silva		Treasurer Name David B. Hayes			
Street Address 148 Hargraves Dr/1100 Aquidneck Ave		Street Address 148 Hargraves Drive			
City Portsmouth/Middletown	State RI	Zip 02871/02842	City Portsmouth	State RI	Zip 02871
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILE IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES					11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			100	Common/None	No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 1 3 3 *

**2133* 4/12/03 12:43:17 PM*

File Date 4-16-03

Check No. 341

By RM

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Robert M. Silva 4/12/03
Signature of Officer Date
Robert M. Silva
Print or Type Name of Officer
Assistant Secretary
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2133 2. Name of Corporation BEACON ONE, INC.
3. Street Address Principal Business Office 148 Hargraves Drive City Portsmouth State Rhode Island Zip 02871
4. Business Phone No. 683-3594 5. State of Incorporation Rhode Island 6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island general real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name David B. Hayes Street Address 148 Hargraves Drive City Portsmouth State RI Zip 02871	Vice President Name David B. Hayes Street Address 148 Hargraves Drive City Portsmouth State RI Zip 02871
Secretary Name David B. Hayes Asst. Sec: Robert M. Silva Street Address 148 Hargraves Drive 1100 Aquidneck Avenue City Portsmouth State RI Zip 02871	Treasurer Name David B. Hayes Street Address 148 Hargraves Drive City Portsmouth State RI Zip 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name NONE Street Address City State Zip	Director Name Street Address City State Zip
Director Name Street Address City State Zip	Director Name Street Address City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
------------------	--------------	-----------

1000 SHS NO PAR VAL

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
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100 Common/None No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date: 9-5-02

Check No.: 711

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date 8/19/02

Robert M. Silva

Print or Type Name of Officer

Assistant Secretary

Title of Officer

5

Form 630 12/01



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **2133** 2. Name of Corporation **BEACON ONE, INC.**
3. Street Address Principal Business Office City State Zip
148 Hargraves Drive **Portsmouth** **RI** **02871**
4. Business Phone No. 683-3594 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
general real estate

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name David B. Hayes Street Address 148 Hargraves Drive City State Zip Portsmouth RI 02871 Secretary Name David B. Hayes Street Address 148 Hargraves Drive City State Zip Portsmouth RI 02871	Vice President Name David B. Hayes Street Address 148 Hargraves Drive City State Zip Portsmouth RI 02871 Treasurer Name David B. Hayes Street Address 148 Hargraves Drive City State Zip Portsmouth RI 02871
--	---

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name NONE Street Address City State Zip Director Name Street Address City State Zip 	Director Name Street Address City State Zip
---	---

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1000 SHS NO PAR VAL

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
100 Common/None No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 1 3 3 *

File Date: **5-16-01**

Check No.: **360**

By: **2**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

David B. Hayes **5/14/01**
Signature of Officer Date
David B. Hayes
Print or Type Name of Officer
President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

2133 BEACON ONE, INC.

3. Street Address Principal Business Office

148 Hargraves Drive

City

Portsmouth

State

Rhode Island

Zip

02871

4. Business Phone No.

5. State of Incorporation

683-3594

RHODE ISLAND

6. SIC Code

5538

7. Brief Description of the Character of Business Conducted in Rhode Island

General real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

David B. Hayes

Street Address

148 Hargraves Drive

City

State

Zip

Portsmouth Rhode Island 02871

Secretary Name David B. Hayes

Asst. Sec: Robert M. Silva

Street Address 148 Hargraves Drive

1100 Aquidneck Avenue

City Portsmouth

State

Zip 02871

Middletown Rhode Island 02842

Vice President Name

Vacant

Street Address

City

State

Zip

Treasurer Name

David B. Hayes

Street Address

148 Hargraves Drive

City

State

Zip

Portsmouth Rhode Island 02842

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

NONE

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1000 SHS NO PAR VAL

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common/None

No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 1 3 3 *

File Date: 2/24/00

Check No.: 303

By: GMP

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Robert M. Silva

Print or Type Name of Officer

Assistant Secretary

Title of Officer

2/22/00

Date



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James A. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2133		2. Name of Corporation BEACON ONE, INC.	
3. Street Address Principal Business Office 310 West Main Road.		City Middletown	State RI
4. Business Phone No. (401) 846-1411		5. State of Incorporation RHODE ISLAND	6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island General Real Estate			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name David B. Hayes		Vice President Name Vacant	
Street Address 148 Hargraves Drive		Street Address	
City Portsmouth	State RI	City	State
Zip 02871		Zip	
Secretary Name David B. Hayes		Treasurer Name David B. Hayes	
Street Address Same		Street Address Same	
City	State	City	State
Zip		Zip	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
1000 SHS NO PAR VAL		- 100 -	Common

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: **04-05-99**
Check No.: **11823**
By: **JD**
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: **David B. Hayes** Date: **3/10/99**
Print or Type Name of Officer: **David B. Hayes**
Title of Officer: **President**



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1998**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

3. Street Address Principal Business Office

4. Business Phone No.

5. State of Incorporation

6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name
David B. Hayes
Street Address
148 Hargraves Drive
City State Zip
Portsmouth RI 02871

Secretary Name
David B. Hayes
Street Address
148 Hargraves Drive
City State Zip
Portsmouth RI 02871

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

Street Address

City State Zip

Director Name

none
Street Address

City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

1000 SHS NO PAR VAL

City

Middletown

State

RI

Zip

02842

6. SIC Code

5538

Vice President Name

Vacant
Street Address

City

State

Zip

Treasurer Name

David B. Hayes
Street Address

148 Hargraves Drive
City State Zip

Portsmouth RI

Zip

2871

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares Class/Series Par Value

100

Common

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 1 3 3 *

File Date: 3/24

Check No.: 8419

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

3/20/98

Date

David B. Hayes
Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **2133** 2. Name of Corporation **BEACON ONE, INC.**

3. Street Address Principal Business Office

City **Middletown** State **RI** Zip **02842**
6. SIC Code **5538**

4. Business Phone No. **(401)846-1411**

5. State of Incorporation **RHODE ISLAND**

7. Brief Description of the Character of Business Conducted in Rhode Island

General Real Estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

Vice President Name

David B. Hayes

Vacant

Street Address

Street Address

148 Hargraves Drive

City **Portsmouth** State **RI** Zip **02871**

Secretary Name

Treasurer Name

David B. Hayes

David B. Hayes

Street Address

Street Address

148 Hargraves Drive

148 Hargraves Drive

City **Portsmouth** State **RI** Zip **02871**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

Director Name

None

None

Street Address

Street Address

City State Zip

Director Name

Director Name

None

None

Street Address

Street Address

City State Zip

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

1000 SHS NO PAR VAL

100

Common

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 1 3 3 *

File Date: **3/17/97**

Check No.: **5438**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] **3/13/97**
Signature of Officer Date

David B. Hayes

Print or Type Name of Officer

President

Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 2133		2. NAME OF CORPORATION BEACON ONE, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 310 West Main Rd		CITY Middletown	STATE RI
		ZIP CODE 02842	
4. BUSINESS PHONE NO. (401) 846-1411		5. STATE OF INCORPORATION RHODE ISLAND	
		8. SIC CODE 5538	
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND GENERAL REAL ESTATE			
8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME David B. Hayes		VICE PRESIDENT NAME Vacant	
STREET ADDRESS 148 Hargraves Dr		STREET ADDRESS	
CITY Portsmouth	STATE RI	CITY	STATE
ZIP CODE -2871		ZIP CODE	
SECRETARY NAME David B. Hayes		TREASURER NAME David B. Hayes	
STREET ADDRESS Same		STREET ADDRESS Same	
CITY	STATE	CITY	STATE
ZIP CODE		ZIP CODE	
9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	CITY	STATE
ZIP CODE		ZIP CODE	
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	CITY	STATE
ZIP CODE		ZIP CODE	
10. SHARES AUTHORIZED AND ISSUED			
AUTHORIZED SHARES			ISSUED SHARES
NUMBER OF SHARES	CLASS / SERIES	NUMBER OF SHARES	CLASS / SERIES
1000 SHS NO PAR VAL		100	Common

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

File Date:

Check No:

By:

For Secretary of State Use Only

Signature of Officer

David B. Hayes
Print or Type Name of Officer

President
Title of Officer

2/16/96
Date

DETACH BOTTOM BEFORE RETURNING

FORM 31 12/95



ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00
Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0002155 Annual Report for the year: 1995

Name of Corporation: BEACON ONE, INC.

Business entity organized under the laws of the State of: Rhode Island

For foreign entity, address and telephone number of principal office:

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()

Brief statement of the character of business conducted in Rhode Island:

TO LEASE AND RENT

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

310 West Main Road

Middletown

Rhode Island 02842

Phone: (401) 846-1411

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>David B. Hayes</u>	<u>148 Hargraves Drive</u>	<u>Portsmouth RI</u>	<u>02871</u>

VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>VACANT</u>			

SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>David B. Hayes</u>	<u>SAME</u>		

TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>David B. Hayes</u>	<u>SAME</u>		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares Class / Series

1000 Common

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares Class / Series

100 Common

Date February 20, 1995 19 95

By: David B. Hayes

President

TITLE OF OFFICER SIGNING

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

DAVID B. HAYES
310 WEST MAIN ROAD
MIDDLETOWN RI 02842

PAID

APR 21 1995
TP 4001
SECRETARY OF STATE

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 0002133 Annual Report for the year: 1994

Name of Business Entity: BEACON ONE, INC.

Business entity organized under the laws of the State of: R.I.

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)

310 WEST MAIN ROAD

MIDDLETOWN

RHODE ISLAND 02842

Phone: (401) 846-1411

Business Entity is (check one):

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

DAVID B. HAYES

PRESIDENT

310 WEST MAIN ROAD

MIDDLETOWN, RI 02842

Brief statement of the character of business conducted in Rhode Island:

Date of Organization 2-2-83 2/23/83 mme

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

☐ CHIEF EXECUTIVE OFFICER OR ☒ PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE

DAVID B. HAYES

148 HARGRAVES DRIVE

FOURSMOUTH, RI

02871

☐ CHIEF OPERATING OFFICER OR ☐ VICE PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE

VACANT

☐ CUSTODIAN OF RECORDS OR ☐ SECRETARY (Check One) STREET ADDRESS CITY/STATE ZIP CODE

DAVID B. HAYES

SAVE

☐ CHIEF FINANCIAL OFFICER OR ☐ TREASURER (Check One) STREET ADDRESS CITY/STATE ZIP CODE

DAVID B. HAYES

SAVE

THE NAMES OF THE DIRECTORS ARE:

NAME STREET ADDRESS CITY/STATE ZIP CODE

NAME STREET ADDRESS CITY/STATE ZIP CODE

NAME STREET ADDRESS CITY/STATE ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 1000

CLASS COMMON

SERIES

PAR VALUE OR WITHOUT PAR VALUE
WITHOUT PAR

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 100

CLASS COMMON

SERIES

PAR VALUE OR WITHOUT PAR VALUE
WITHOUT PAR

Date FEBRUARY 16, 19 94

By: DAVID B. HAYES

PRINT OR TYPE NAME OF OFFICER SIGNING

PRESIDENT

TITLE OF OFFICER SIGNING

Form 31 1/94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

DAVID B. HAYES
310 WEST MAIN ROAD
MIDDLETOWN RI 02842

FILED
FEB 23 1994
By 45158 mme

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

41572

Corporate ID 0002133 Annual Report for the year 1993

FIRST: The name of the corporation is BEACON ONE, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to lease and rent.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 310 West Main Road
Middletown R.I. 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
David B. Hayes	President	148 Hargraves Drive Portsmouth R.I. 02871
Vacant	Vice President	
David B. Hayes	Secretary	Same as above
David B. Hayes	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common		Without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		Without par value

Dated February 2 19 93

Beacon One, Inc.

(Name of Corporation)

By David B. Hayes

David B. Hayes

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

ws 33211

Corporate ID 0002133 Annual Report for the year 1992

FIRST: The name of the corporation is BEACON ONE, INC.

SECOND: It is incorporated under the laws of

THIRD: Character of business, briefly stated, is to lease and rent.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 310 West Main Road
Middletown R.I. 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
David B. Hayes	President	148 Hargraves Drive Portsmouth R.I. 02871
Vacant	Vice President	
David B. Hayes	Secretary	Same as above
David B. Hayes	Treasurer	Same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common		Without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		Without par value

PAID

FEB 20 1992

Series

SEC'Y OF STATE

Dated February 18, 19 92

Beacon One, Inc.

(Name of Corporation)

By David B. Hayes

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0002133..... Annual Report for the year.....1991.....

FIRST: The name of the corporation is.....BEACON ONE, INC.....

SECOND: It is incorporated under the laws of.....

THIRD: Character of business, briefly stated, is.....to lease & rent.....

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....310 West main Road.....

Middletown, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

David B. Hayes

President

148 Hargraves Drive, Portsmouth, RI 02871

Vacant

Vice President

David B. Hayes

Secretary

Same as Above

David B. Hayes

Treasurer

Same as Above

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

1000

Common

PAID

without par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

Common

without par value

Dated.....January 29..... 19 91.....

Beacon One, Inc.
(Name of Corporation)

By

David B. Hayes

Title.....President.....

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

CZ

Corporate ID 0002133 Annual Report for the year 1990

FIRST: The name of the corporation is BEACON ONE, INC.

SECOND: It is incorporated under the laws of

THIRD: Character of business, briefly stated, is to Lease and Rent

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

310 West Main Road, Middletown, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

David B. Hayes President 148 Hargraves, Portsmouth, RI 02871

Vacant Vice President

David B. Hayes Secretary 148 Hargraves, Portsmouth, RI 02871

David B. Hayes Treasurer 148 Hargraves, Portsmouth, RI 02871

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

1000

Common

Without par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

Common

Without par value

Dated January 29 19 90

BEACON ONE, INC.

(Name of Corporation)

By

David B. Hayes

Title

President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between *Sept*
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0002133 Annual Report for the year 1989

FIRST: The name of the corporation is BEACON ONE, INC.

SECOND: It is incorporated under the laws of _____

THIRD: Character of business, briefly stated, is To Lease and Rent

FOURTH: If foreign corporation, address of its principal office _____

FIFTH: Business address in Rhode Island 310 West Main Road, Middletown, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
------	--------	--

_____	Director	_____
_____	Director	_____
_____	Director	_____
David B. Hayes	President	117 Richard Drive, Portsmouth, RI 02871
Vacant	Vice President	_____
David B. Hayes	Secretary	117 Richard Drive, Portsmouth, RI 02871
David B. Hayes	Treasurer	117 Richard Drive, Portsmouth, RI 02871

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	Common	PAID	Without par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common	SEC'Y OF STATE	Without par value

Dated January 30 19 89 Beacon One Inc.

(Name of Corporation)

By David B. Hayes

Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 2133 Annual Report for the year 1988

FIRST: The name of the corporation is BEACON ONE, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is TO LEASE AND RENT

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

310 WEST MAIN ROAD, MIDDLETOWN, RHODE ISLAND 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

DAVID B. HAYES

President

117 RICHARD DRIVE, PORTSMOUTH, RI 02871

VACANT

Vice President

DAVID B. HAYES

Secretary

117 RICHARD DRIVE, PORTSMOUTH, RI 02871

DAVID B. HAYES

Treasurer

117 RICHARD DRIVE, PORTSMOUTH, RI 02871

SEVENTH: Number of Shares authorized:

No. of Shares

Class

1000

COMMON

Par Value
or statement that
shares are without
par value

WITHOUT PAR VALUE

EIGHTH: Number of Shares issued:

No. of Shares

Class

100

COMMON

Par Value
or statement that
shares are without
par value

WITHOUT PAR VALUE

Dated JANUARY 11 19 88

BEACON ONE INC.

(Name of Corporation)

By DAVID B. HAYES

Title PRESIDENT

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 2132 Annual Report for the year 1987

FIRST: The name of the corporation is BEACON ONE, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is TO LEASE AND RENT

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island
310 WEST MAIN ROAD, MIDDLETOWN, RHODE ISLAND 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

DAVID B. HAYES President 117 RICHARD DRIVE, PORTSMOUTH, RI 02871

VACANT Vice President

DAVID B. HAYES Secretary 117 RICHARD DRIVE, PORTSMOUTH, RI 02871

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

1000

COMMON

WITHOUT PAR VALUE

EIGHTH: Number of Shares issued:

PAID

MAR 13 1987

No. of Shares

Class

FEB 03 1987

Series

Par Value
or statement that
shares are without
par value

100

COMMON

SEC'Y OF STATE

WITHOUT PAR VALUE

Dated JANUARY 29 19 76

BEACON ONE INC.

(Name of Corporation)

By DAVID B. HAYES

Title PRESIDENT

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 2133 Annual Report for the year 1986

FIRST: The name of the corporation is BEACON ONE, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is TO LEASE AND RENT

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

310 WEST MAIN ROAD, MIDDLETOWN, RHODE ISLAND 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
DAVID B. HAYES	President	117 RICHARD DRIVE, PORTSMOUTH, RI 02871
VACANT	Vice President	-
DAVID B. HAYES	Secretary	117 RICHARD DRIVE, PORTSMOUTH, RI 02871
DAVID B. HAYES	Treasurer	117 RICHARD DRIVE, PORTSMOUTH, RI 02871

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	COMMON		WITHOUT PAR VALUE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	COMMON		WITHOUT PAR VALUE

Dated JANUARY 16 1986

(Report must be signed by an officer)

BEACON ONE INC.
(Name of Corporation)
By David B. Hayes
Title PRESIDENT

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

CORPORATE ID #2133

Annual Report for the year 1985

FIRST: The name of the corporation is BEACON ONE, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is TO LEASE AND RENT

MOTOR VEHICLES

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 310 WEST MAIN ROAD, MIDDLETOWN, RHODE ISLAND 02840

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
DAVID B. HAYES	President	117 RICHARD DRIVE, PORTSMOUTH, RI 02871
VACANT	Vice President	-
DAVID B. HAYES	Secretary	117 RICHARD DRIVE, PORTSMOUTH, RI 02871
DAVID B. HAYES	Treasurer	117 RICHARD DRIVE, PORTSMOUTH, RI 02871

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	COMMON		WITHOUT PAR VALUE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	COMMON		WITHOUT PAR VALUE

Dated: JANUARY 7, 19 85

BEACON ONE, INC.

(Name of Corporation)

By DAVID B. HAYES

Title PRESIDENT

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

CORPORATE ID #2133

Annual Report for the year 1984

FIRST: The name of the corporation is BEACON ONE, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is TO LEASE AND RENT
MOTOR VEHICLES

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) 310 WEST MAIN ROAD, MIDDLETOWN, RHODE ISLAND 02840

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
DAVID B. HAYES	President	117 RICHARD DRIVE, PORTSMOUTH, RI 02871
VACANT	Vice President	
DAVID B. HAYES	Secretary	117 RICHARD DRIVE, PORTSMOUTH, RI 02871
DAVID B. HAYES	Treasurer	117 RICHARD DRIVE, PORTSMOUTH, RI 02871

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1000	COMMON		WITHOUT PAR VALUE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	COMMON		WITHOUT PAR VALUE

Dated: December 17 19 84

BEACON ONE, INC.

(Name of Corporation)

By DAVID B. HAYES

Title PRESIDENT

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040